COUNTER-ARGUMENT AND REBUTTAL

➢ What is a counter-argument?

A counter-argument is an argument opposed to your thesis or part of your thesis. It expresses the view of a person who disagrees with your position (Oldham).

➢ Where do I put a counter-argument?

A counter-argument can appear anywhere in your essay, but it most commonly appears:

- As part of your introduction—before you propose your thesis—where the existence of a different view is the motive for your essay, the reason it needs writing.
- As a section or paragraph just after your introduction, in which you lay out the expected reaction or standard position before turning away to develop your own.
- As a quick move within a paragraph, where you imagine a counter-argument not to your main idea, but to the sub-idea that the paragraph is arguing or is about to argue.
- As a section or paragraph just before the conclusion of your essay, in which you imagine what someone might object to what you have argued. (Harvey)

➢ How do I introduce a counter-argument?

Counter-argument in an essay has two stages. In this first stage, you turn against your argument to challenge it. The following is a listing of ways to approach introducing counter-arguments and templates for structuring them:

1) Imagine a skeptical reader

- Yet some readers may challenge the view that _________.
- After all, many believe _________.
- Indeed, my own argument that _________ seems to ignore ________ and _________.
- Of course, many will probably disagree with this assertion that _________.

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2) **Cite an actual source, critic or group of critics**, who might resist your argument

- Here many *feminists* would probably object that _________.
- But *social Darwinists* would certainly take issue with the argument that _________.
- Nevertheless, both *followers and critics of Malcolm X* will probably argue that _________.

3) **Look at your arguments** themselves for possible:

- **problems** with your conclusion
  
  Others, however, may conclude _________.

- **disadvantages** to what you propose
  
  This proposed solution does have some disadvantages _________.

- **alternative explanations** that makes more sense.
  
  Alternatively, this issue could be viewed _________.

After introducing your counter-argument, you state the case against yourself as briefly but as clearly and forcefully as you can, pointing to evidence where possible (Harvey).

➢ **How Do I Rebut a Counter Argument?**

In the second stage, you turn back to re-affirm your argument. You may consider the following rebuttal tactics and models for structuring them:

1) **Quote acknowledged experts** that support your position

- While many may see this argument as flawed, ____________John Smith, an expert in his field, also finds__________.

2) **Redefine the criteria** of “known” concepts

- Although I grant that _________, couldn’t it also be possible that _________.

3) **Find agreement** and show how your **new idea supports a shared idea**

- I agree with X that _________. Furthermore, this idea actually supports my point because _________.

4) Pointing out **faulty assumptions in your critic’s arguments** where:

- the **facts** are wrong
Proponents of X are right to argue that __________. But they exaggerate when they claim that __________.

- the analysis is incorrect
  While it is true that __________, it does not necessarily follow that __________.
- the values it is based on are not acceptable
  It is dangerous to believe ________________ because ________________.

Following the introduction of your rebuttal, you must then go on to suggest why the opposing argument is relatively less important or less likely than what you propose, and thus, doesn’t overturn it.

(Templates adapted from Graff & Birkenstein 79-85)

➢ Example

This table shows an argument, counter-argument, and one possible rebuttal to this counter-argument:

<table>
<thead>
<tr>
<th>Argument</th>
<th>Counter-argument</th>
<th>Rebuttal</th>
</tr>
</thead>
<tbody>
<tr>
<td>The primary focus in medical end-of-life decisions should be on patient consent, rather than doctor intention, because it is not a breach against a patient's rights if s/he consents to the termination of their life.</td>
<td>Terminally ill patients are likely to be depressed, and, therefore, unable to consent to their hastened death in a balanced or acceptable way.</td>
<td>Depression can be managed. The relevance of depression must be made on a case-by-case basis. Depression does not warrant a general rule prohibiting patients from consenting to a hastened death.</td>
</tr>
</tbody>
</table>

➢ Practice

Using the information provided in the chart above, try to introduce and rebut the counter-argument in paragraph form below:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

*See page 4 for one way to introduce and rebut this counter-argument.*
Works Consulted & Further Reading


*The following paragraph is one way in which you might introduce and rebut the counter-argument from page 3:

Yet, some readers may challenge that basing medical end-of-life decisions on patient consent may lead to abuse, since many terminally ill patients are depressed, and, therefore, unable to make sound decisions on matters of such significance (Here the author is imagining a skeptical reader to introduce a counter-argument and stating this reader’s case). While it is true that such patients may have a greater tendency to depression, we cannot justifiably assume all patients are depressed, or that depression, even when present, prevents a patient from consenting in a balanced and acceptable way (Next, the author is rebutting the counter-argument by pointing out faulty analysis in the counter-argument). Depression is generally manageable nowadays, and a medical diagnosis can determine when a person is incapable of making such a decision. The issue of depression, therefore, should be dealt with on a case-by-case basis, and not be a reason for prohibiting choice in general (Finally, the author is suggesting why this counter-argument is less likely than what s/he proposes, and thus, doesn't overturn it).

(Adapted from CALT Learning Support)